MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.	FILING DATE
10/568755	

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1			
2		1		1		
3		2				
4		①		1		
5		①		1		
6		②		1		
7		②		1		
8		②		1		
9		②		1		
10		①		1		
11		①		1		
12				1		
13				1		
14				1		
15		①		1		
16		①		1		
17		①		1		
18		①		1		
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TOTAL IND.	⇩	2	⇩		⇩	
TOTAL DEP.	⇦	18	⇦		⇦	
TOTAL CLAIMS		20				

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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100						
TOTAL IND.	⇩		⇩		⇩	
TOTAL DEP.	⇦		⇦		⇦	
TOTAL CLAIMS						

PTO-1360 (REV. 11/04)